

NH Board of Nursing

Position Statement and Clinical Practice Advisories Regarding the Role of the RN in Women's Health

The following grid contains responses to specific frequently asked questions pertaining to RN scope of practice within this topic.

Clinical Practice Advisory Summary – Women's Health FAQ

Activity/Question	Within RN Scope of Practice?	Comments	Date of Last Review
LABOR & DELIVERY NURSING			
Amniotomy	No	<i>Is</i> within scope of certified nurse midwife (CNM), and <i>may be</i> within scope of nurse practitioner depending upon area of licensure	
Epidural, injection of medication directly into line of <i>pregnant patient</i>	No		
Epidural, injection of medication directly into line of <i>non-pregnant, postoperative patient</i>	No		
Epidural, rate adjustment of medication delivered through mechanical pump into existing epidural line	Yes	The Board respectfully acknowledges the Association of Women's Health, Obstetric and Neonatal Nurses position statement regarding dose adjustments of regional analgesia delivered by continuous infusion in the pregnant patient. Facilities may independently restrict this practice.	
External fetal monitoring	Yes		
False labor, certification of and patient discharge	Yes	The Board reaffirms that the provider will determine competent nurses who can act as the QMP (qualified medical personnel) to certify false labor and discharge of the patient following facility policies and procedures that support the practice.	
Spiral electrodes (fetal scalp electrodes), application of	Yes		
Vaginal prostaglandin administration for fetal demise	Yes		
Vaginal prostaglandin (e. g. Cervidil) administration with live fetus, for cervical ripening	Yes		
Cervidil insertion for vaginal ripening	Yes		

Misoprostol, rectal administration for post partum hemorrhage	Yes		
GENERAL WOMEN'S HEALTH ROLES			
Artificial insemination – intravaginal, intrauterine, and intracervical	Yes		
Breast exams	Yes		
Diaphragm fitting	Yes	A diaphragm requires a prescription that must be provided by someone with prescriptive authority such as an APRN or physician, and that in order to write the prescription, the provider is responsible for confirming the fit of the diaphragm.	
Pap smears	Yes		
Pelvic and bi-manual examinations	Yes		
STD specimen collection	Yes		
Vulvovaginitis, assessment	Yes		
HOME BIRTH			
Assisting CNM or CPM at home birth	See comments.	The Board consensus is that an RN can take orders and provide care under the auspices of a certified nurse midwife (CNM), a licensed advanced practice registered nurse. A registered nurse CANNOT take orders and provide care under the auspices of a certified <i>professional</i> midwife (CPM). A CPM is not recognized as a licensed individual from whom an RN would take orders, or work with under her or his scope of practice.	
IV Fentanyl for pain control in pregnant and non-pregnant patients	Yes, Note that Sufenta and Remifentanyl are <i>not</i> within the scope of the RN or LPN.	Yes – Fentanyl	